1503 - 139 - 2719

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

2015 FEB - 6 PM 12: 02

Ome use Only MAIL CENTER

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FB4M5

PESS (r	number and street)	31794	ÇARI	YEROS AVE	YUE, ,				
tha	eck if different in previously iorted. (ACC)	LEWE	S _{LL}				. PE	19958	2253
FEC IE	ENTIFICATION NU	MBER V		CITY ▲		s	TATE A	ZIP C	ODE A
Ċ: C	00541094	· ·		3. IS THIS REPORT	X NEV	OR	· AM (A)	ENDED	
TYPE (Choos	OF REPORT (d One)	(b) Moi Reg		Feb 20 (M2)	May	20 (MS)	Aug :	20 (M8)	Nov 20 (M11 (Non-Becton Year Only)
(a) Q	uarterly Reports:		· •	Mer 20 (M3)	Jun	20 (M6)	Sep :	20 (M9)	Dec 20 (M12 (Non-Baction Year Only)
	April 15 Quarterly Report (C	_m _		Apr 20 (M4)	(Jul	20 (M7)	Oct 2	D (M10)	Jan 31 (YE)
	July 15 Quarterly Report (C October 15 Quarterly Report (C	22) (C)	12-Day PRE-EI Report	·	Primary (12P) Convention (120	 ()	General (Runoff (12R
×	January 31 Year-End Report (1	re)		Election on	TW W / D	٠ ، ٥	/ "V	in the State	
•	July 31 Mid-Year Report (Non-electio Year Only) (MY)	n (d)		Election for the:	General (30G)		Runoff (3	OR)	Special (305
	Termination Report (TER)			Election on	1 1 0	ૡૺ૽ૺ	2014	in the State	
Coveri	ng Period \\		ځ	2014	through	12.	36	2014	
	t I have examined th			ne best of my kno RYAN	wledge and beli	ef it is tru	e, correct and	d complete.	
	nt Name of Treasure of Treasurer	<u> </u>		Ala	2		ate Ol	100	مناهد

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form SX (Rev. 02/2003)

Page 2

Write or Type Committee Name

Repo	ort Covering the Period: From:	25 2014	io: 2014
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
. (a) Cash on Hand January 1, 2014		, 836,57
(b) Cash on Hand at Beginning of Reporting Period	, 300.52	
1	(c) Total Receipts (from Line 19)		, .00
	(d) Subtotal (add Lines 6(b) and 8(c) for Column A and Lines 6(a) and 6(c) for Column B)	The state of the s	
 7.	Total Disbursements (from Line 31)	15.00	, :15,∞
	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	235,52	, 285.62
	Debts and Obligations Owed TO the Committee (Bernize all on Schedule C and/or Schedule D)	O .	
	Debts and Obligations Owed BY the Committee (Nemize all on Schedule C and/or Schedule D)	The state of the s	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 8X (Rev. 06/2004)

Page 3

Write or Type Committee Name

FIRSTPAC FOR POLITICAL FREEDOM

Report Covering the Period: From:	2014	To: 12 31 2014
I. Receipts	COLUMN A Total This Period	COLUMN 8 Calendar Year-to-Date
11. Contributions (other than loans) From:		•
(a) Individuals/Persons Other		
Than Political Committees	gine i kingwi kan yang melangan begi	and the second of the second o
(i) Hernized (use Schedule A)	The second of the backwards of the performance of the second of the seco	Section 1995 And Sectio
(ii) Uniternized	(a) The second of the secon	The state of the contract to the state of the state of
(W) TOTAL (add	to have a finished with his way of the history	
Lines 11(a)(i) and (ii)	The second secon	Control of the second section of the second
(b) Political Party Committees	- control of a till of testinger and a control of	
(c) Other Political Committees	Country of a Continue Country of the Continue Country of the Count	0
(such as PACs)		n and a second second
(d) Total Contributions (add Lines	•	
11(a)(iii), (b), and (c)) (Carry	Carrier Commission of the Comm	· . · · · . · · · · · · · · · · · · · ·
Totals to Line 33, page 5)	TO BE A COMMON TO SERVICE OF A COMMON TO SERV	in the Section Constitute and the Constitute of
12. Transfers From Affiliated/Other	and the second s	The state of the s
Party Committees	Commission of the commission o	garan kan satisfan kan di kanada kan kan di kanada kan Garan kanada di kanada kan
13. All Loans Received	اد آهي جي هن الاستراطيل المطالحين الوقيد هن الاستراطيل المستراطين المستراطين المستراطين المستراطين المستراطين الم المراكز الراكز المراكز المراكز المستراطين المستراطين المستراطين المستراطين المستراطين المستراطين المستراطين ال	na vivil si sa
14. Loan Repayments Received	ing and the state of the state	్లు కార్కు సంకేష్టులోని కోరుడి ఉద్యాత్తున్నారు.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		e production of the second
(Carry Totals to Line 37, page 5)	and the second second	a the contract the second of the second
16. Refunds of Contributions Made	The second of th	
to Federal Candidates and Other	And the second second second	man and any state of the contract of the contr
Political Committees		
17. Other Federal Receipts		and the second s
(Dividends, Interest, etc.)		• • •
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account	the transfer of the control of the second	and the second s
(from Schedule H3)	A Maria Distriction of the second sec	and an experience of a payon of the contract o
(b) Levin Funds (from Schedule H5)	en e	and the second of the second o
(c) Total Transfers (add 18(a) and 18(b))	ing and the state of the state	The state of the problem of the con-
19. Total Receipts (add Lines 11(d).		and a second second
12, 13, 14, 15, 18, 17, and 18(c))	0:	(
16, 10, 10, 10, 17, 00 10, 17, 00	* Constant of the Constant of	* V * F D A
20. Total Federal Receipts	and the second second section in the second	
(subtract Line 18(c) from Line 19)>	Contract the second of the second	(1)

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DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

Page 4

	ii. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	perating Expenditures:	Total Trus Period	Calendar rear-to-Date
(8	Allocated Federal/Non-Federal Activity (from Schedule H4)	•	are g
	(i) Federal Share	15.00	, , 551.05
	(ii) Non-Federal Share:	•	. ,
a	o) Other Federal Operating	, • • • • • • • • • • • • • • • • • • •	,
,	Expenditures		
(c) Total Operating Expenditures		
•	(add 21(a)(i), (a)(ii), and (b))	, , , , , , , , , , , , , , , , , ,	551,05
22. 1	ransfers to Affiliated/Other Party	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
~ (Committees		,
1	Contributions to Federal Candidates/Committees and Other Political Committees		
24.	ndependent Expenditures		
25.	(use Schedule E)	(a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	• •
	(2 U.S.C. §441a(d)) (use Schedule F)		,
26.	Loan Repayments Made	1	, ,
-	1 11	***	• • • •
27. 28.	Loans Made	1 1 1 1 1 1 1 1 1 1	,
	(a) Individuals/Persons Other Than Political Committees	, , , 0	. , , 0
	(b) Political Party Committees	**************************************	, , , , , , , , , , , , , , , , , , ,
	(c) Other Political Committees	one in the second second	
	(such as PACs)	A STATE OF THE STA	
	(d) Total Contribution Refunds		0
	(add Lines 28(a), (b), and (c))▶	, , ,	
29 .	Other Disbursements	, 0	0
	Federal Election Activity (2 U.S.C. §431(20))		
-	(a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	• • • • • • • • • • • • • • • • • • •	• •
	(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(6			· · · · · · · · · · · · · · · · · · ·
,	Lines 30(a)(i), 30(a)(ii) and 30(b))	g	, , , , , , , , , , , , , , , , , , , ,
		\$1	
	otal Disbursements (add Lines 21(c), 22, 3, 24, 25, 26, 27, 28(d), 29 and 30(c))	, , 15.00	, , 551.05
			7 33103
	tal Federal Disbursements		
-	ubtract Line 21(a)(ii) and Line 30(a)(ii)	. 0	•
arc	om Line 31)		0

ERANGE

DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 5
10.	Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Catendar Year-to-Date
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	0.	, , 0
34.	Total Contribution Refunds (from Line 28(d))		·
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	0	0
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	IL AA'	551.0 <i>5</i>
37 .	Offsets to Operating Expenditures		
38.	(from Line 15, page 3) Net Operating Expenditures		, , , , , , , , , , , , , , , , , , ,
	(subtract Line 37 from Line 36)	, , , , , , , , , , , , , , , , , , ,	, 554.0°S

TI	EMIZED DISBURSEMENTS	for each car	ite schedule(s) tegory of the immary Page	(check	21b		z		_ 2]25	0F2	.6
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_	for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	e and addres	s of any political	commit	99 to :	solicit co	ntributi	ons	from :	such o	ommit	86 .	
/	FIRSTPAC FOR POLITICAL FI	REEDOM	1										
A .	Full Name (Last, First, Middle Initial)		····		T	Date of	Diebe		nent				لــــ
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	Mailing Address 31794 CARNEROS AVENUE	 			\perp	12	.	3	ŀ.	, ZU]	4		
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	Purpose of Disbursament BANKING SERVICES/FEES			001		Amount				semen	this	Period	
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	\	ent For: Primary [Other (specify	General) ▼	.,,,,,			,			•	. •	-	
B .	Full Name (Last, First, Middle Initial)					Date of			-				
	Mailing Address	<u> </u>			\dashv	4 4				'	· •	•	
	City	tate Z	To Code		+								
	Purpose of Disbursement	 			-								
	Candidate Name			Category Type			of Ear		: :		₹25er		
	President	ent For: Primary [Diher (specify)	General →	 -			-						
	State: District: Full Name (Last, First, Middle Initial)		······································		+								_
C.						Date of				'Y" Y	. , .,	•	
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	Candidate Name			Category Type	,		of Eac	٠, ٠	. ث		÷ -,		
		ent For: Primary [Other (specify)	General) ₩										
9	SUBTOTAL of Disbursements This Page (optional)							•					
┝	OTAL This Period (last page this line number only)				>		14 20 1 - 14				19	.00	2
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S	SCHEDULE A (FEC Form 3X)				
			Use separate schedule(4.5	FOR LINE NUMBER: PAGE OF (check only one)
1	TEMIZED RECEIPTS		for each category of the	9	□11a □11b □11c □12
			Detailed Summary Page	9	13 14 15 16 17
6	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	ay not be sold or used by a address of any political com	any pers	on for the purpose of soliciting contributions a solicit contributions from such committee.
N	NAME OF COMMITTEE (In Full)				
	FIRSTPAC FOR POLITICAL	L FREEDO	OM		
A					Date of Receipt
	Mailing Address 31794 CARNEROS AVENU	E			и V V V V V V V V V V V V V V V V V V V
	LEWES	State DE	Zip Code 19958-2523		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	See See		0
	Name of Employer SELF-EMPLOYED	Occupation MEDI/	A DEVELOPMENT		
	Receipt For:	Aggregate '	Year-to-Date ▼		
	Primary A General		••		
	Other (specify)		, . , , ,	0	
В .	Full Name (Last, First, Middle Initial)				Date of Receipt
	Mailing Address				M M / Ó D / Y Y Y Y
	City	State	Zip Code		
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	federal political committee.	O .	£]	, ,
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					Amount of Each Receipt this Period
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	federal political committee.	Ņ			entropy of the second
	Name of Employer	Occupation			•
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SI	JBTOTAL of Receipts This Page (optional)				Or and Property and Advantage
Tr	OTAL This Period (last page this line number or	nhv)		→	O
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)ANS	Use separate achedule(s)	PAGE OF
	for each category of the Detailed Summary Page	FOR LINE 13 OF FORM 3X
NME OF COMMITTEE (In Full) N/A		
LOAN SOURCE Full Name (Last, First, Middle Initial)		ENCAGA:
		Primery General
Mailing Address		Other (specify)
City State Z		
Original Amount of Loan Cumulative Payme	ent To Date Balance	Outstanding at Close of This Perio
The state of the		
TERMS Date trourred . Date	Due Interest Rate	Secured:
M M / D D / Y'Y Y Y - Mina / B b /	Y Y Y	<u></u>
	No.	% (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source		
1. Full Name (Lest, First, Middle Initial)	Name of Employer	·
Mailing Address	Occupation	
	Amount	
City State ZIP Code	Guaranteed Outstanding:	•
2. Full Name (Last, First, Middle Initial)	Name of Employer	
	· · · · · · · · · · · · · · · · · · ·	
Mailing Address	Occupation	
	Amount	
City State ZIP Code	Guaranteed Outstanding:	9 ,
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LOANS AND LINES OF CREDIT FROM Federal Election Commission, Westington, D.C. 20462	LENDING INSTITUTION	DNS	- 1	Supplements Information (Page	ry for ound on if Schedule
NAME OF COMMITTEE (In Full)			FEA /DI		
N/A		1	C	NTIFICATION	m Numbi
LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	L	7	nterest Rate	(APR)
Mailing Address		•			%
· · · · ·	Date incurred or Establishe		n. , o	D / A	V V Y
City State Zip Code	Date Due	· i		D / Y	ý y y
A. Has loan been restructured? No Yes	If yes, date originally incurre	đ	_	D / 'Y	•
B. If line of credit, Amount of this Draw:	Total Outstanding Balance:	;		•	
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other. No Yes If yes, specify: E. Are any future contributions or future receipts of interest collateral for the loan? No Yes If yes, specify: A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	deposit, chattel papers, similar traditional collaterai?		nder have ? No estimated	value?	- 1
Date account established:	Address:				
	City, State, Zip:				===
If neither of the types of colleteral described above was p the loan amount, state the basis upon which this loan wa COMMITTEE TREASURER Typed Name Signature	ladeed for this isen, or if the am	DATE		t equal or e	
COMMITTEE TREASURER Typed Name Signature Attach a signed copy of the loan agreement. TO BE SIGNED BY THE LENDING INSTITUTION: 1. To the best of this institution's knowledge, the terms of are accurate as stated above. II. The loan was made on terms and conditions (including similar extensions of credit to other borrowers of comparities).	ledged for this loan, or if the ame is made and the basis on which of the loan and other information g interest rate) no more favorable credit worthiness.	DATE H H / regarding e at the tir	the extens	sion of the I	v
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			(Use so		FOR LINE NUMBER:
	AND OBLIGATIONS		for e	ech	(check only one)
	ng Loans		number	ed line)	10
NAME O	F COMMITTEE (In Full)				
	N/A				
IA F	ull Name (Last, First, Middle Initial) of Deb	tor or Creditor	No	iture of C	Osbt (Purpose):
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- 1					
Mailin	g Address		1		
	State	Zip Code			
City	State	Lip code	- 1		
-	and the second second				
Out	standing Balance Beginning This Period				
İ	, , , , ,				
1	Amount incurred This Period	Payment This Period	•	Outstandii	ng Balance at Close of This Period
1	• .			•	
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B. Full	Name (Last, First, Middle tritial) of Debto	r or Creditor	Na	ture of D	ebt (Purpose):
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-					
MERITING	Address				
City		State Zip Code			
Outlest	anding Balance Beginning This Period				
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	Amount Incurred This Period	Payment This Period	O	utstandin	g Balance at Close of This Period
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MIZED INDEPENDENT EXPENDITURES				PAGE FOR LINE	OF 24 OF FORM 30
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City State	Zip Code	11			iengmenjenstyrverjas Kaldinisten III. stori
Purpose of Expenditure	Category/ Type	Office Sou	aght:	House Senate	State: District:
Name of Federal Candidate Supported or Opposed by Expendi	ture:	Check On	e [President Support	Оррозе
Calendar Year-To-Date Per Election for Office Sought	en agraman agrama par s in Dominion a Caralina d	Disburser	ent For: Other (sp	∟ , '	General
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City State	Zip Code	1 5			estensk entro cester
Purpose of Expenditure	Category/ SType American American	Office Sou	ight:	House Senate	State: District:
Name of Federal Candidate Supported or Opposed by Expend	Rure:	Check On	<u> </u>	_ President _ Support	Оррове
Cesting tear to cess for crocost	generalise prospecting conservancy		ent For: Other (sp	Primary	General
(a) SUBTOTAL of Itemized Independent Expenditures		· 🕨 🕯			
(b) SUBTOTAL of Uniterrized Independent Expenditures	***************************************	7000	been varia	حبائمه مخاد بعيمار يعي	and the second s
(c) TOTAL independent Expenditures		ş este	amyani,	os issendan in	
Under penalty of perjury I certify that the independent expendit with, or at the request or suggestion of, any candidate or authorizing committee) any political party committee or its agent.	tures reported herein were inized committee or agent o	not made in f either, or (the rep	ition, consulti corting entity	ition, or concert is not a political
Signature	Date	Same?	i jo o o	j 	رسماسی درگونانگری

Committee Comm	BEHALF OF CANDIDATES	S OR DES	RAL C	FRCE			PAGE	OF
ME OF COMMITTEE (in Full) N/A 3 your committee been designated to make risheated expenditures by a political purty committee? The Marine of Subordinate Committee The Marine (Lest, First, Middle Initial) of Each Peyer Total Name (Lest, First, Middle Initial) of Each Peyer Total Name (Lest, First, Middle Initial) of Each Peyer Total Name of Federal Candidate Supported Office Sought: Total Name of Federal Candidate Supported Office Sought: Total Name of Federal Candidate Supported Office Sought: Total Name of Federal Candidate Supported Office Sought: Total Name of Fed						teneral Election)	FOR LINE 2	S OF FORM
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SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds and Nonconnected Committees Only)

	USE ONLY ONE SECTION, A or B
A. :	State and Local Party Committees
	Fixed Percentage (select one)
	Presidential-Only Election Year (28% Federal)
	Presidential and Senate Election Year (36% Federal)
	Senate-Only Election Year (21% Federal)
3. 9	Non-Presidential and Non-Senate Election Year (15% Federal) Separate Segregated Funds and Nonconnected Committees
3. \$	Non-Presidential and Non-Senate Election Year (15% Federal) Separate Segregated Funds and Nonconnected Committees Flat Minimum Federal Percentage
3. \$	Separate Segregated Funds and Nonconnected Committees
3. \$	Separate Segregated Funds and Nonconnected Committees Flat Minimum Federal Percentage If the committee will allocate using the flat minimum percentage of 50% federal funds, check
3. \$	Separate Segregated Funds and Nonconnected Committees Flat Minimum Federal Percentage If the committee will allocate using the flat minimum percentage of 50% federal funds, check or
3. (Separate Segregated Funds and Nonconnected Committees Flat Minimum Federal Percentage If the committee will allocate using the flat minimum percentage of 50% federal funds, check or If the committee is spending more than 50% federal funds, indicate ratio below

LOCATION RATIOS		PAGE OF
ME OF COMMITTEE (In Full) N/A	 	
ATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATION OF THIS REPORT.	TE SUPPORT	
athods of allocation:		
 FUNDRAISING activities are allocated using the "funds received meth expenses must equal the federal proportion of monies raised. 	od" where the lederal pr	roportion of
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to the federal proportion of disbursements is based on the benefit tivity. For PACs Only: Direct candidate support includes public committederal and nonfederal candidates, regardless of whether there is a reallocated using a time/space method.	t derived by federal cand unications or voter drives	lidates from the ac- that refer to both
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	. %	
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	- %	• •
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New Revised Same as Previously Reported		
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ACTIVITY IS: Fundraising Direct Candidate Support	. %	e esta p
CHECK IF THE RATIO IS: New Revieed Same as Proviously Reported		, ;• , %
ACTIVITY OR EVENT IDENTIFIER		
ACTIVITY IS:	FEDERAL %	NONFEDERAL %
Fundraising Direct Candidate Support	%	•

Same as Previously Reported

SCHEDULE H3 (FEC. Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE OF
FOR LINE 18a OF FORM 3X

N/A		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
	M M / D 0 / Y Y Y	ľ
		., 9
BREAKDOWN OF TRANSFER RE	ECEIVED	
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(ii) Generic Voter Drivo		• • • • •
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ill) Exampt Activities		· , · · · · · · · · · · · · · · · · · ·
iv) Direct Fundralsing (List Acti	vity or Event Identifier)	
a)	The state of the s	
b)	·	•
c) Total Amount Transferred (For Direct Fundraising	• • • • • • • • • • • • • • • • • • • •
v) Direct Candidate Support ((List Activity or Event Identifier)	
(a)	and the second s	
b)	e e e e e e e e e e e e e e e e e e e	
[0)		
c) Total Amount Transferred	For Direct Candidate Support	en en en en en en en en en en en en en e
İ	,	
vi) Public Communications Re	sterring Only to Party (Made by PAC)	en de la companya de la companya de la companya de la companya de la companya de la companya de la companya de
	TOTALS FOR BREAKDOWN OF TRANSFER RECEM	VED
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TOTAL This Period (Generic Voter D	,	•
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TOTAL This Period (Exempt Activitie		• • • • • • • • • • • • • • • • • • •
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TOTAL This Period (Exempt Activities TOTAL This Period (Direct Fundrals)	ss)	• • • • • • • • • • • • • • • • • • •
TOTAL This Period (Direct Fundrates	ing)	** *** *** **** **** ***** ***********
TOTAL This Period (Exempt Activities TOTAL This Period (Direct Fundrate) TOTAL This Period (Direct Candida)	rg)	* * * * * * * * * * * * * * * * * * *
TOTAL This Period (Exempt Activities TOTAL This Period (Direct Fundreist TOTAL This Period (Direct Candidate TOTAL This Period (Public Communication)	ing)	3.

SCHEDULE H4 (FEC Form 3X) PAGE DISBURSEMENTS FOR ALLOCATED 72 FEDERAL/NONFEDERAL ACTIVITY FOR LINE 21a OF FORM 3X NAME OF COMMITTEE (In Full) N/A A. Full Name (Lest, First, Middle Initial) Allocated Activity or Event: Administrative Fundrateing Exernot Meiling Address Voter Drive Direct Candidate Support CHY State Zip Code Public Comm (ref to party only) by PAC Affocated Activity or Event Year-To-Date Purpose of Disburgement: From the Bushines Burgar Activity or Event Identifier: w w', o o', "v', v', v', v', v' Category/ Date FEDERAL SHARE TOTAL AMOUNT NONFEDERAL SHARE regional and the second Allocated Activity or Event: B. Full Name (Last, First, Middle Initial) Administrative Fundraising Example Mailing Address ☐ Voter Drive ☐ Direct Cendidate Support Zip Code Public Comm (ref to perty only) by PAC Allocated Activity or Event Year-To-Date Purpose of Disbursement: Activity or Event Identifier: Category/ NONFEDERAL SHARE TOTAL AMOUNT FEDERAL SHARE an 🛊 - Barrie 🛊 - La an ji<u>taa</u> kan Allocated Activity or Event: C. Full Name (Last, First, Middle Intilet) Administrative Fundraising Example Melling Address ☐ Voter Drive ☐ Direct Candidate Support Public Comm (ref to party only) by PAC Zlo Code City Allocated Activity or Event Year-To-Date Purpose of Disbursement: Land to the second second second **Activity or Event Identifier:** CHILD DO TOTAL V VAV V. Category/ Type and the second of TOTAL AMOUNT NONFEDERAL SHARE FEDERAL SHARE أم المعرورة والمعاجر الروار The state of the s SUBTOTAL of Allocated Federal and NonFederal Activity This Page NONFEDERAL SHARE = TOTAL AMOUNT FEDERAL SHARE

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii)) NONFEDERAL SHARE

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Company of the Compan

TOTAL AMOUNT FEDERAL SHARE The second secon

SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

		Local Party Committees Only)	FOR LINE 186 OF FOR
AME OF COMMITTEE (In Full) N/A			
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BREAKDO	WN OF THIS TRANSFER	,	
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	Total Amount Transferred fo	r Voter Registration	_
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LI)	Voter ID		
	Total Amount Transferred to	r Voter ID	,
	•		GOTV
H1)	GOTV		
	Total Amount Transferred to	r GOTV	programme and the second
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14)		r Generic Campaign Activity	•
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NAME OF	ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
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H)	Voter ID		
	Total Amount Transferred for	Voter ID	\$
			GOTY
III)	GOTV		
	Total Amount Transferred for	GOTV	3
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•		Generic Cempaign Activity	
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	TOTALS FO	R BREAKDOWN OF TRANSFER RECEIVED (Last	Page Only)
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TOTAL	This Period (GOTV)	**************************************	3 . • .
TOTAL	This Period (Generic Campei	on Activity)	
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-	This Desired (Third America) of	Transfers Received)	e. O note i semi noto Brancos e e estação de mesmo de está co

SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY (To be used by State, District and Local Party Committees Only)

PAGE OF
FOR LINE 30s OF FORM 3X

N/A					
		Type of	Allocated Activity	y or Event:	
. Full Name (Last, First, Middle Initial) / Full Organization Name		W	ter Registration		GOTV
		w	ter ID	Gen	eric Campa
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lating Address		7	Cased Activity O		
Signe Zip Colle		1	3 ,	- 1	•
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Purpose of Disbursement	Category/ Type	Date	·		
FEDERAL SHARE + LEVIN SH	IARE	=	TOTAL	AMOUNT	
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B. Full Name (Last, First, Middle Initial) / Full Organization Name		1	Allocated Activity or Registration		GOTV
			er ID		uto Cempel
			andred Arthur		Th. Date
Mailing Address		7 480	cated Activity or	CAMIL LOSS.	NO COMP
CRY SIENE ZO COOK	With Sign and	-	. Marchaell.)	•
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Purpose of Disbursement	Category/ Type	Date		_	
Purpose of Disbursement FEDERAL SHARE + LEVIN SH	Category/ Type				
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	Category/ Type	=	TOTAL	AMOUNT	•
FEDERAL SHARE + LEVIN SH	Category/ Type	=	TOTAL Allocated Activity	AMOUNT or Event:	. •
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SCHEDULE L (FEC Form 3X) AGGREGATION PAGE: LEVIN FUNDS

IAWD	NAME OF COMMUTEE (In Full)				
NAME OF ACCOUNT					
	·· <u>··</u> ··	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE		
1.	RECEIPTS FROM PERSONS				
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SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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